

APPLICATION INFORMATION

Governor Gary Locke established the Governor's Scholarship program in 2001 to assist youth in state-recognized foster, group or kinship care in the state of Washington to enroll in and complete programs of study at eligible colleges/universities in Washington. *Please read further for more specific details regarding the definition of "state-recognized" care.* The Washington Education Foundation (WEF) has been selected to manage this program. Scholarships will be renewed until completion of programs as long as recipients maintain "satisfactory academic progress" at their colleges and continue to have high financial need levels. Awards will normally be limited, however, to four years for students working on four-year college degrees, or limited to the normal duration of programs that are less than four years. Any exceptions to this will be determined on an individual basis.

Scholarship Application Criteria

Each applicant for the Governor's Scholarship program must:

- Be a dependent youth in state-recognized foster, state-recognized group or state-recognized kinship care in the state of Washington or be an eligible refugee who is/has been in private non-profit agency care (please read further for more specific eligibility requirements for refugees). For the purposes of this program, being in "state-recognized care" means that a dependency court order must have resulted from intervention by Washington State on behalf of the youth OR that the youth is classified by the United States Government as an unaccompanied minor refugee, is a legal permanent resident, and is in legal care of a private non-profit agency in Washington State (or was in this care through the agency's maximum age limit). Other important clarifications:
 - Tribal-recognized care qualifies as state-recognized care as long as the youth's placement is under jurisdiction of the tribal court (similar to a county juvenile court).
 - A high school senior who is older than 18 years old and who is no longer living with his/her foster family (i.e., the student did not pursue or could not receive a Voluntary Placement Agreement [VPA]), is still qualified to apply for the Governor's Scholarship as long as he/she was in state-recognized care until age 18.
 - A former foster youth who has been placed by the state back into the custody of his/her parent(s) before his/her 18th birthday, or who has been adopted, is **not** eligible for the Governor's Scholarship. This program is directed at students who remain in state-recognized foster care or private agency care until at least age 18.
 - For a youth to be eligible as receiving kinship care, the state must have intervened on the youth's behalf and issued a dependency court order that consequently placed the youth in legal kinship care. A youth who is residing with his/her relatives in any other type of situation is **not** eligible to apply for the Governor's Scholarship
- Have resided in Washington State for three (3) academic years immediately prior to the projected date he/she will receive a high school diploma (in most cases, this means the student began enrollment in a Washington high school by August/September 2001 at the latest).
- Be an enrolled Washington state high school senior at the time of application and plan to graduate from that high school during the 2003-04 academic year. **GED graduates are not eligible for this scholarship program.**
- Have a cumulative high school grade point average of at least 2.0.
- Fully complete a Governor's Scholarship application. This includes submitting essays, an official high school transcript, a letter verifying state-recognized foster, group or kinship care, or private agency care, and two letters of recommendation. **Please note that any additional documents (e.g., extra letters of recommendation, resumes, award certificates) will not be considered in the selection process. With the exception of documents relating to the applicant's state-recognized care or private agency care status, it is best to not include any additional items.**
- Demonstrate financial need as determined by the college he/she attends, as well as by completing the 2004-2005 *Free Application for Federal Student Aid (FAFSA)*.
- Plan to be a full-time student (12 or more credits per term) and enroll in a college program of study towards the completion of a two or four-year degree or certificate.
- Plan to attend college beginning the Fall 2004 term at any of the 56 eligible, public or private, nonprofit accredited colleges or universities in the state of Washington. This includes all of the public community and technical colleges, as well as most public and private nonprofit four-year colleges and universities. Students who wish to transfer later on may only transfer to an eligible college/university in Washington.

Scholarship Award Amounts

The scholarship award amount will vary dependent upon each selected student's financial need level and the amount of financial aid that the student receives from other sources. This scholarship amount will be determined after considering all federal, state, college and private financial aid and scholarships that have been awarded to the student at the time the Governor's Scholarship is being decided. It is expected that Governor's Scholarship recipients will receive a combination of scholarship, grant, loan and work-study employment assistance to make their college attendance financially possible. Scholarships are expected to range between \$1000 and \$5000 per year, with the average award expected to be approximately \$4000 per year.

Scholarship Selection Criteria

A Governor's Scholarship selection committee will meet to review all qualified scholarship applications. The committee will select recipients based on the following criteria:

1. Academic preparedness – having the academic skills and coursework required for college enrollment.
2. Resiliency – the ability to persist toward goals in the face of obstacles or challenges.
3. Openness to receive support – the willingness to use support services when needed.
4. Leadership – the motivation and commitment to play a significant role in an activity, group, organization or one's family.
5. Educational and career goal-setting – the ability to set educational and career goals and plan the intermediate steps to reach these goals.

Application Deadline: Postmarked or Received by Monday, March 1, 2004

All applications postmarked or received by March 1, 2004 will be considered "on time." A Governor's Scholarship selection committee will meet in March to review all qualified applications.

Scholarship Notification Date

WEF plans to notify, in writing, all applicants of the selection decisions by no later than April 9th, 2004 (mail date).

Additional Student Services and Mentor Support

WEF staff will work with the colleges that Governor's Scholarship recipients are admitted to in order to help facilitate their financial aid and scholarship awards. Each recipient must do his or her part in completing all necessary WEF, college, and federal financial aid forms, such as the FAFSA, on a timely basis. WEF will work with each college to provide a mentor to each Governor's Scholarship recipient for at least the first two years of the recipient's enrollment.

Receipt of Other Significant Scholarship Awards

Should an applicant be eligible to receive other significant private or foundation-supported scholarships (such as the Washington State Achievers Scholarship, the Gates Millennium Scholarship or the Orphan Foundation of America Scholarship), WEF reserves the right to withdraw or reduce the amount of the Governor's Scholarship at a later date. Unless such other scholarships have already been promised, however, applicants that meet the application criteria should be sure to apply for the Governor's Scholarship. Please note that **if an applicant has already been promised the Washington State Achievers Scholarship, he/she is not eligible to apply for the Governor's Scholarship.**

Because the Washington Education Foundation cannot guarantee a Governor's Scholarship for every student who applies, we strongly encourage all applicants to also apply for the Orphan Foundation of America (OFA)/Casey Family Programs' Scholarship. Applicants can download an OFA/Casey scholarship application form beginning January 1, 2004, at www.orphan.org/programs/casey.html or call OFA at 1-800-950-4673 for more information. This is another great scholarship opportunity that will increase the chances of receiving financial aid for college!

Recommended Timelines and Steps for Completion of Application Materials

Begin working on your application as soon as possible! Here are suggestions for completing the process:

1. Complete Parts 1 and 2 of the application (Form A) right away to make sure you meet the application criteria.
2. Ask your high school for an official copy of your current high school transcript so that you may enclose it with your application.
3. Ask your social worker or agency to complete Form B, verifying the period of time that you have been in state-recognized foster, state-recognized group or state-recognized kinship care.
4. Ask an adult who knows your academic performance well (such as a teacher or counselor) to complete Form C, the Academic Recommendation. Please note that we cannot accept recommendations from relatives, current foster parents or other foster family members, spouses, boyfriends/girlfriends or peers.
5. Ask an adult who knows your personal character well to complete Form D, the Personal Recommendation. Again, please note that we cannot accept recommendations from relatives, current foster parents or other foster family members, spouses, boyfriends/girlfriends or peers.
6. Type a first draft of your responses to the six essay questions (Part 4 of Form A). Then review, revise and do a second draft. Share this second draft with one of your teachers and ask for the teacher's comments and suggestions. Type your final copy.
7. Complete the *2004-05 Free Application for Federal Student Aid (FAFSA)*, available on the Internet at www.fafsa.ed.gov or as a paper application at your high school. **Complete the FAFSA as soon as possible and make two copies.** Include one copy of the FAFSA [or a copy of your *Student Aid Report (SAR)* if you have received this back from the government already] with your scholarship application. Keep the other copy of the FAFSA for your personal records.
8. Make sure your social worker and recommenders return their materials (Forms B, C and D) back to you by Friday, February 20 so that you have enough time to prepare all of your application materials for mailing to WEF.
9. Use the checklist (Part 6 of Form A) to make sure all materials are enclosed. Make a copy of your application and essays for your records before mailing the originals to WEF. Mail all required documents by **Monday, March 1, 2004** to:

Washington Education Foundation
Governor's Scholarship Program
1605 NW Sammamish Road, Suite 100
Issaquah, WA 98027

Have Questions or Need Help?

Please call the Washington Education Foundation if you have any questions or need assistance with the application process. Call our toll-free phone number, 1-877-655-4097, and ask to speak with a staff member about the Governor's Scholarship program.

2004-05 ACADEMIC YEAR APPLICATION

Please read the "Application Information" document carefully before completing this application.
Type or neatly print all responses. The application must be postmarked or received by Monday, March 1, 2004.

PART ONE – STUDENT APPLICANT INFORMATION

Student Name: _____
First M.I. Last

Date of Birth: _____ Gender: ☐ Female ☐ Male Social Security #: _____
(MM/DD/YYYY)

Mailing Address: _____

City: _____ State: _____ Zip: _____ E-mail: _____

Home Phone: (____) _____ - _____ Cell Phone: (____) _____ - _____

If you, the applicant, have or will be responsible for a child, please explain: _____

**Names of Washington colleges and universities to which you have applied, or will apply, for admission
(please list in order of interest):**

		Admitted?		
1 st Choice _____	Date of Application _____ month/year	<input type="checkbox"/> Y	<input type="checkbox"/> N	<input type="checkbox"/> Still waiting on reply from college

Anticipated program of study _____

2 nd Choice _____	Date of Application _____ month/year	<input type="checkbox"/> Y	<input type="checkbox"/> N	<input type="checkbox"/> Still waiting on reply from college
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Anticipated program of study _____

3 rd Choice _____	Date of Application _____ month/year	<input type="checkbox"/> Y	<input type="checkbox"/> N	<input type="checkbox"/> Still waiting on reply from college
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Anticipated program of study _____

The following items are collected for research and program development purposes. Collected data will not be shared with any governmental agency.

Are you a U.S. Citizen? ☐ Yes ☐ No If no, are you a legal permanent resident? ☐ Yes ☐ No

If applicable, what is your Alien Registration #? _____

If English is not your first language, what language do you speak best? _____

Ethnicity (how you best describe yourself; please read all choices and choose only one):

- ☐ African ☐ American Indian ☐ Asian, Asian American or Pacific Islander
- ☐ Black American ☐ White or Caucasian ☐ Hispanic – of European ancestry
- ☐ Hispanic/Latino—of Mexican, Central or South American or Caribbean (Cuban, Puerto Rican, Dominican) ancestry
- ☐ Multi-Racial (please specify) _____
- ☐ Other (please specify) _____

How did you learn about applying for this scholarship? _____

PART TWO – ELIGIBILITY

Eligibility Checklist (check all the requirements that you meet):

- ☐ I am a dependent youth in state-recognized foster, state-recognized group or state-recognized kinship care in the state of Washington. Please see the “Scholarship Application Criteria” section of the *Application Information* document for more details about what constitutes “state-recognized” care.
- ☐ I began enrollment at a Washington high school in _____.
month/year
- Name of high school at which I began enrollment: _____
- ☐ I will graduate from a Washington high school in _____ of the 2003-04 academic year.
month
- Name of high school from which I will graduate: _____
- Mailing address of this high school _____
- Name of this high school’s principal (*if you are selected to receive this scholarship, we will send a letter to your principal notifying him/her that you have done so*) _____
- ☐ I plan to enroll on a full-time basis, beginning the fall term of 2004, and complete a program of study at an eligible, nonprofit accredited public or private college or university in the state of Washington.
- ☐ I have applied or will apply for financial aid, including submitting the 2004-05 *Free Application for Federal Student Aid (FAFSA)*. Date *FAFSA* was submitted: _____
month/year

PART THREE – FOSTER CARE CONTACT INFORMATION

Please provide contact information for an adult—preferably a person currently living with the student—who may be contacted should the selection committee need to discuss any additional information about the student’s application.

Name of Adult Contact _____
First M.I. Last

Home Phone: (_____) _____ - _____ Cell Phone: (_____) _____ - _____

Work Phone: (_____) _____ - _____ E-mail: _____

Relationship to applicant:

☐ Foster Parent

☐ Kinship Care Provider

Specific relationship to applicant: _____

☐ Group Care Provider

Name of group care organization: _____

☐ Other

Specific relationship to applicant: _____

PART FOUR – ESSAY QUESTIONS

When writing your essays, please keep the following in mind:

- Respond to **all** of the essay questions. Be sure to clearly note the number of the question to which you are responding.
- All responses must be typed. You may include more than one answer per page.
- Type your name and social security number at the top right corner of each page you submit.
- Your response to each question should be approximately 100 – 300 words in length. ***No answer should be less than 100 words.***

Essay Questions

1. How have you prepared yourself academically for college? How well does your current cumulative grade point average reflect your academic potential?
2. Describe a significant challenge you have faced. How did you deal with that challenge? Explain how having dealt with that challenge affects you now.
3. Describe how two or three support services/individuals have helped you during your teen years. What type of support do you think you might need from now through your first two years of college?
4. Discuss a significant role you have played in any area of your life —school, work, athletics, family, church, community, etc. How and why did you become involved in this role? How did this experience influence your personal goals?
5. What are your career goals by age 30? How did you decide upon these goals? How will earning a two or four-year degree help you reach these goals?
6. *Note: Your response to the following question will not be considered in the essay scoring. However, it may be shared anonymously with advocates of foster youth:* Based on your experience in foster, group or kinship care, what recommendations would you make to improve the system for other youth who are in similar circumstances?

PART FIVE –STUDENT APPLICANT AGREEMENT/CERTIFICATION

I certify by my signature below that, to the best of my knowledge, all information and statements submitted are current, complete, and accurate and that the essays accompanying this form are my own work. I understand that if information is found to be false or inaccurate, it is sufficient cause for rejection or dismissal from the Governor's Scholarship program. I further understand that the information submitted in this application may be shared with the Washington Education Foundation (WEF) staff, the Governor's Scholarship selection committee, and with the admissions and financial aid offices at the college(s) I may be applying to or attending. I also understand and agree that information may be shared between the WEF and all colleges or universities to which I may be applying for admission or which I may be attending. The information includes, but is not limited to: information on my admission or enrollment status; information on my financial aid status, including my cost of education, my expected family contribution as determined by the Free Application for Federal Student Aid (FAFSA), family income level and family size, and all financial aid and scholarship programs for which I may be eligible; information on my academic progress, including if I am maintaining satisfactory academic progress, my current and cumulative grade point average, the courses in which I am and have been enrolled, and my academic major and areas of interest; contact information including phone numbers, email addresses and home and local addresses; information on my progress towards graduation and information about my graduation when that occurs; and any other information needed by WEF to effectively administer my scholarship award.

Student Name: _____
First M.I. Last

Student Social Security Number: _____

Student Signature: _____ Date: _____

PART SIX – DOCUMENT CHECKLIST

When complete, mail all of the following to the Washington Education Foundation:

- ☐ Washington State Governor's Scholarship Application (pages A1-A4)
- ☐ Typed responses to the six essay questions (refer to Part 4 of Form A)
- ☐ Official copy of your current high school transcript (must be in a sealed envelope)
- ☐ Form B and letter documenting state-recognized foster, group or kinship care status
- ☐ Form C and academic letter of recommendation
- ☐ Form D and personal letter of recommendation
- ☐ Copy of your 2004-2005 *Free Application for Federal Student Aid (FAFSA)* or your *Student Aid Report (SAR)* if you have received that back from the federal government already. In addition, if you have received financial aid awards from the college(s) to which you have applied, please provide copies of those as well.

Mail all application materials to:

Washington Education Foundation
Governor's Scholarship Program
1605 NW Sammamish Road, Suite 100
Issaquah, WA 98027-5378

Remember that the application (postmark) deadline is Monday, March 1, 2004!

**LETTER DOCUMENTING STATE-RECOGNIZED
FOSTER, GROUP OR KINSHIP CARE STATUS****FORM
B**

Applicant: Please fill out Part 1. Then ask your social worker or social service agency to complete Part 2 of this form in order to verify your state-recognized foster, state-recognized group or state-recognized kinship care status.

PART 1 (to be completed by the applicant)

Applicant's Name: _____
First MI Last

Social Security Number: _____ - _____ - _____

Applicant's Mailing Address: _____

City State Zip Phone Number(s): (_____)_____

First choice college applicant hopes to attend: _____

I give permission for _____ (name of individual or agency) to release the information requested for my scholarship application.

Applicant's signature: _____ Date: _____

PART 2 (to be completed by a social worker or social service agency)

The youth named above in Part 1 is submitting an application for the **Governor's Scholarship for Youth in State-Recognized Foster, Group and Kinship Care** from the Washington Education Foundation (WEF). **For eligibility screening, we require a letter on agency letterhead documenting the time he/she has spent in Washington state-recognized foster, state-recognized group or state-recognized kinship care.**

Please complete this form and attach a signed letter on your agency's letterhead documenting the dates during which the youth was in state-recognized foster, group or kinship care through your agency and/or other agencies known to you. Also, if you are aware of any support services or financial resources for which the youth will be eligible during college, such as tuition waivers, please inform us. Please return your letter and this form in a ***sealed envelope*** to the applicant who will include it with his/her scholarship application. If you have any questions regarding this form or the requested letter, please contact the Washington Education Foundation at 1-877-655-4097. Thank you very much for your support of this applicant!

Social Worker's name: _____
First MI Last

Agency Name: _____

Agency Mailing Address: _____

City State Zip Phone Number(s): (_____)_____

Dates applicant has been in state-recognized care _____ to _____
(mm/yy) (mm/yy)

Total length of time in care: _____ # of placements during this time: _____

**Please remember to enclose this form and your letter of documentation in a sealed envelope.
The applicant must submit this envelope to WEF with his/her application by Monday, March 1, 2004 (postmark).**

Applicant: Please fill out Part 1. Then ask your academic recommender—a teacher, counselor, or someone else who is familiar with your academic performance—to complete Part 2. Remember that we cannot accept letters of recommendation from relatives, current foster parents or foster family members, spouses, boy/girlfriends or peers.

PART 1 (to be completed by the applicant)

Applicant's Name: _____
First MI Last

Social Security Number: _____ - _____ - _____

Applicant's Mailing Address: _____

City State Zip Phone Number(s): (_____) _____

First choice college applicant hopes to attend: _____

I give permission for _____ (name of individual or agency) to release the information requested for my scholarship application.

Applicant's signature: _____ Date: _____

PART 2 (to be completed by the recommender)

The applicant named above has requested your recommendation to complete his/her application for the **Governor's Scholarship for Youth in State-Recognized Foster, Group and Kinship Care** from the Washington Education Foundation (WEF). To the extent that you can comment on each of the following factors, please do so:

1. Academic preparedness – having the academic skills and coursework required for college enrollment.
2. Resiliency – the ability to persist toward goals in the face of obstacles or challenges.
3. Openness to receive support – the willingness to use support services when needed.
4. Leadership – the motivation and commitment to play a significant role in an activity, group, organization, or one's family.
5. Educational and career goal-setting – the ability to set educational and career goals and plan the intermediate steps to reach these goals.

Please complete this form and return with your letter, ***which separately addresses each of the five criteria***, in a ***sealed envelope*** to the applicant, who will include it with his/her scholarship application. If you have any questions regarding this form or the requested letter, please contact the Washington Education Foundation at 1-877-655-4097. Thank you for your support of the applicant!

Name: _____
First MI Last

Title: _____ Institution/Organization: _____

Relationship to Applicant: _____

Street Address: _____

City State Zip Phone Number(s): (_____) _____

**Please remember to enclose this form and your letter of recommendation in a sealed envelope.
The applicant must submit this envelope to WEF with his/her application by Monday, March 1, 2004 (postmark).**

Applicant: Please fill out Part 1 of this form. Then ask your personal recommender—someone who is familiar with your personal character—to complete Part 2 of the form. Remember that we cannot accept letters of recommendation from relatives, current foster parents or foster family members, spouses, boy/girlfriends or peers.

PART 1 (to be completed by the applicant)

Applicant's Name: _____
First MI Last

Social Security Number: _____ - _____ - _____

Applicant's Mailing Address: _____

City State Zip Phone Number(s): (_____) _____

First choice college applicant hopes to attend: _____

I give permission for _____ (name of individual or agency) to release the information requested for my scholarship application.

Applicant's signature: _____ Date: _____

PART 2 (to be completed by the recommender)

The applicant named above has requested your recommendation to complete his/her application for the **Governor's Scholarship for Youth in State-Recognized Foster, Group and Kinship Care** from the Washington Education Foundation (WEF). To the extent that you can comment on each of the following factors, please do so:

6. Academic preparedness – having the academic skills and coursework required for college enrollment.
7. Resiliency – the ability to persist toward goals in the face of obstacles or challenges.
8. Openness to receive support – the willingness to use support services when needed.
9. Leadership – the motivation and commitment to play a significant role in an activity, group, organization, or one's family.
10. Educational and career goal-setting – the ability to set educational and career goals and plan the intermediate steps to reach these goals.

Please complete this form and return with your letter, **which separately addresses each of the five criteria**, in a **sealed envelope** to the applicant, who will include it with his/her scholarship application. If you have any questions regarding this form or the requested letter, please contact the Washington Education Foundation at 1-877-655-4097. Thank you for your support of the applicant!

Name: _____
First MI Last

Title: _____ Institution/Organization: _____

Relationship to Applicant: _____

Street Address: _____

City State Zip Phone Number(s): (_____) _____

**Please remember to enclose this form and your letter of recommendation in a sealed envelope.
The applicant must submit this envelope to WEF with his/her application by Monday, March 1, 2004 (postmark).**